

## BLUE MOUNTAINS RHODODENDRON SOCIETY OF NSW INC.

## PO BOX 238, BLACKHEATH NSW 2785

## **MEMBERSHIP FORM**

1 July 2016 – 30 June 2017

Please circle preferred title		Mr	Mrs	Ms	Other
SURNAME/S					
GIVEN NAMES					
ADDRESS					
TELEPHONE		MOBILE			
EMAIL ADDRESS					
DATE		SIGNATURE			
PLEASE INCLUDE ALL NAME	S WHERE MORE THAN ON	IE MEMBER IS APP	LICABLI	<b>.</b>	
Membership Renewal	(\$11.00 per person)	\$			
New Member	(\$11.00 per person)	\$			
Donation (optional)		\$			
	Total enclosed	\$			
Cheque	Cash	Direct Cred	it		
<u>Cheques</u> to be made payable to: Blue Mountains Rhododendron Society of NSW Inc					c
<u>Direct credit</u> payment to: A/C Name: Blue I		Mountains Rhodod	endron	Socie	ty of NSW Inc
	/C Number: 10012	2075			
	PLEASE USE YOUR	SURNAME AS A RI	EFEREN	CE FOI	RIDENTIFICATION
Renewals/New membershi	ps to be forwarded to:				
Membership Secretary					
	PO Box 238, Blackl	heath NSW 2785			
Please tick areas of interest:		Special Skills			
Volunteering for garde	ening				
Volunteering for funct	ions				
Please tick how you would	prefer to receive the News	sletter <b>5</b>			
Email	Post				
OFFICE USE ONLY:	Date:				